Logic Model

MS Preventive Health & Health Services Grant

Input

1 Funding Resources

- 2 Human
- Resources
- 3 Provider Resources
- 4 Partnering Resources

Partnerships

Diabetes Foundations Information and **Quality Healthcare** MS Dept Human Srvcs MS Dept Education **UMMC Metabolic Clinic** MS Dept of Medicaid Jackson State Uni Community Based Orgs MS Association of Broadcasters National Diabetes **Education Program** Centers for Disease Control & Prevention MS Chronic Illness Coalition African American Community **Rural Population** American Heart Assoc MS Alliance for School

Health

Injury Prevention

American Diabetes

Ofc of Highway Safety

Association

Advisory Committee

MSDH Staff Injury Branch Director School Health Nurse Consultant Health Education Dir CVH Assistant Coordinator Districts I. IV. & VIII **Health Educators**

Chronic Disease **Epidemiologist**

Activities

Monitoring Activities

- 1. CVH State-Level Assessment
- 2. Clearinghouse: Data, Methods, Resources
- 3. Physician Practice Survey: CVH Prevent
- 4. Behavioral Risk Factor Surveillance Sys

Inform / Educate

- School/community based education programs with HP 2010 priorities:
 - * Intentional and unintentional injury
 - * Violence & suicide
 - * Tobacco use / addiction
 - * Alcohol & other drugs
 - * Unintended pregnancy
 - * HIV/AIDS and STD infection
 - * Unhealthy dietary patterns
 - * Inadequate physical activity
 - * Environmental health
- Heart Dz / Stroke media campaign
- 3. Heart Dz / Stroke education
- 4. Hypentension education
- 5. Injury Safety & Education Training
- 6. Fire prevention education Learn Not to Burn
- 7. Capitol Day
- 8. Youth Risk Behavior Survey

Community Partnership Mobilization

- 1. Diabetes Advisory Group Meetings
- 2. Worksite & Faith-based Programs
- 3. Community Health Centers (CHCs)
- 4. Injry Prevention Advisory Committee
- 5. Coordinated School Health Program **Projects**
- 6. MS Alliance for School Health -
- * Mini Grants
- 7. MS Department of Education
- 8. MS Chronic Illness Coalition
- 9. MS Statewide Immunization Coalition
- 10. MS Head Start & MS Safe Kids

Policy Development

- 1. CVH Policy Related Issues
- 2. CVH Practice Guidelines
- 3. Injury State Plan
- 4. Youth Data Collection Strategic Plan

Link to Provision of Care

CHC - CVD Collaborative - MOU

Assurance of Competent Workforce

- 1. District Health Educator In-Service Training
- 2. Grant Writing Technical Assistance to Health Ed
- 3. Injury Educational Training for Health Educator

Short Term **Outcomes**

By September 30, 2004:

- 1. Address cardiovascular health related policies in 1 of 4 settings (worksites, schools, healthcare, community).
- 2. Increase public awareness of and advocacy for reduction of risk behaviors in at least 5 public health districts.
- 3. Increase public awareness of cardiovascular
- 4. Educate public on signs/symptoms of heart attack and stroke.
- 5. Increase the number of community-based and faith-based organizations that focus on health promotion and education efforts in at least 5 public health districts.
- 6. Conduct semiannual inservice training for District Health Educators / Facilitators on community health education & health promotion interventions.
- 7. Provide education to physicians on latest CVH guidelines.
- 8. Increase public awareness of & advocacy for injury prevention and safety in local communities using the MS Injury Report Card data and risk behavior data.
- 9. Increase proportion of public health districts working with agencies to further coordinate injury prevention activities.
- 10. Health educators, nurses, school personnel, and key community partners will be trained in effective strategies addressing the risk behaviors in youth & adults.
- 11. Reduce by 1% the prevalence of risk factors for sedentary lifestyle, overweight, & tobacco
- 12. Conduct a cost benefit analysis for targeted high-risk counties during Phase I of the Smoke Installation Program.
- 13. Conduct Learn Not to Burn training sessions for teachers in Hinds County and targeted Smoke Alarm Installation Program communities.
- 14. Increase by at least 1% the proportion of youth who engage in moderate physical
- 15. Reduce the safety belt non-usage rate of MS high school students to \leq 20%...
- 16. Develop a 5-yer plan to consolidate the youth data collected that meets the needs of the Education Dept, Health Dept, Mental Health Dept, Partnership for a Health MS, & DREAM, Inc.

Intermediate **Outcomes**

- 1. By 09/30/05, reduce CV disease deaths to < 430 per 100,000.
- 2. By 09/30/05, reduce by 2% the # of persons who are at risk for coronary heart disease due to no leisure time physical activity.
- 3. By 09/30/05, reduce coronary heart disease deaths to ≤ 185 per 100,000 people.
- 4. By 09/30/06, reduce unintentional injury deaths to ≤ 53.7 per 100,000 people.
- 5. By 09/30/06, reduce by 2% the prevalence of risk factors for sedentary lifestyle, tobacco usage, teen pregnancy, and unintentional injury in high school students.

Long Term **Outcomes**

By 2010,

- 1. Increase in the proportion of the Nation's elementary, middle, junior high, & senior high schools that have a nurse to student ratio of at least 1:750.
- 2. Increase the proportion of Tribal and local health service areas or jurisdictions that have established a community health promotion program that addresses multiple Healthy People 2010 focus areas.
- 3. Reduction in Coronary Heart Disease to 166 deaths per 100,000 population.
- 4. Reduction in deaths caused by unintentional injuries to 17.5 per 100,000.

Organization / Planning

- MS State Plan for Diabetes Prevention and Control
- MS State Plan for Cardiovascular
- MS State Plan for Injury **Prevention and Control** Coordinated School Health

Information Systems

Behavioral Risk Factor Surveillance System

Community Health Center

INFRASTRUCTURE